

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000004729

Entity Name: DNH MEDICAL MANAGEMENT, INC.**Current Principal Place of Business:**500 W MONROE STREET
CHICAGO, IL 60661**Current Mailing Address:**500 W MONROE STREET
CHICAGO, IL 60661 US**FEI Number:** 95-3263067**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** SALVINA AMENTA-GRAY

01/18/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	KOLO, JOSEPH
Address	500 WEST MONROE STREET
City-State-Zip:	CHICAGO IL 60661

Title	DIRECTOR, VP
Name	MARTIN, KATHLEEN
Address	500 W MONROE STREET
City-State-Zip:	CHICAGO IL 60661

Title	PRESIDENT
Name	TERRY, JEFFREY
Address	500 W MONROE STREET
City-State-Zip:	CHICAGO IL 60661

Title	ASSISTANT SECRETARY
Name	ESKEW, PIA
Address	500 W MONROE STREET
City-State-Zip:	CHICAGO IL 60661

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PIA ESKEW**AUTHORIZED PERSON**

01/18/2023

Electronic Signature of Signing Officer/Director Detail

Date